



Retail Food Establishment Inspection Report

Floyd County Health Department
Telephone: 812-948-4726

X10600

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name PRIDE Bar + Lounge	Telephone Number 812 207 9456	Date of Inspection (mm/dd/yr) 11/26/2019	PERMIT # 19-234
Establishment Address (number and street, city, state, zip code) 504 State St New Albany, IN 47150	812 207 6103		
Owner Warren Brown / Dan Hanlon	Purpose: Routine	Follow-up No	Release Date TODAY
Owner's Address	2. Follow-up	Summary of Violations: C 1 NC 3 R 1	
Person in Charge Dan Hanlon	3. Complaint		
Responsible Person's E-mail	4. Pre-Operational	Menu Type (See back of page) 1 2X 3 4 5	
Certified Food Manager Must obtain within 30 days	5. Temporary		
	6. HACCP		
	7. Other (list)		

• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"

• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"

Section#	C/NC	R	Narrative	To Be Corrected By
118	C	R	Observed establishment without CFM - disguised requirements with PIC/owner - "Food Safety Manager" / 5 year certification - must test in person - must obtain within 30 days or commit to Menu Type 1	30 days
297	NC		Observed build-up on plastic lip of kante ice machine	Today
351	NC		Observed uncovered trash can in restroom	1 week
433	NC		Observed mop not properly hung to dry - use utility sink in BOH corner	
			PIC/owner said that no food service had occurred in past 2 months, however Menu Type 2 still requires a CFM unless establishment drops to Menu Type 1	

Received by (name and title printed):

Dan Hanlon

Received by (signature):

Dan Hanlon

cc:

Inspected by (name and title printed):

A.J. Ingram (EHS)

Inspected by (signature):

AJ

cc: